

2022

Preferred Formulary Drug List



Overview

Veracity's Formulary or **Preferred Drug List** or "**PDL**" a list of prescription medications that represents the current clinical judgement of our clinical team, providers, and experts in the diagnosis and treatment of different diseases. It contains clinical prescribing information that assists health care professionals when prescribing the highest quality affordable drugs to patients. The PDL represents the efforts of our clinical team to a method to evaluate the various drug products available. *Note that not all drugs that are available are listed in this document-only those that are the most commonly dispensed by general practitioners and specialists are listed and there are thousands of readily available generic drugs for effective products not listed in this document.* For generically available products, only the generic name of the medication is listed.

Additionally, as drug prices increase, new products are released, and brand drugs lose patent, limiting drug selection to preferred products (generics, brands) has become more critical. Our clinicians work to manage a balanced formulary, offering the best clinical products based on (1) safety, (2) efficacy, (3) availability, (4) lowest potential for abuse, (5) limited side effects, (6) viable clinical alternatives, (7) patient educational needs & availability, and finally (8) cost. While a very high percentage of plan designs follow this formulary, some small percentage may make plan design modifications and/or apply their own clinical management parameters.

Coverage Limitations

The PDL does not provide information regarding specific coverage, limitations or exclusions, nor member out-of-pocket costs (known as "member contributions" or more commonly "copays") that may be assigned at plan level. The PDL applies to out-patient drugs provided to members, and *does not* apply to medications used in the in-patient setting (with the exception of some physician administered office products). All applicable dosage forms and strengths of a particular drug are not included in the PDL in all cases (e.g., creams, lotions, gels, pumps, kits, orally disintegrating tablets, etc.). For non-covered products, please check with your account manager if you have questions. For specialty drugs, see plan design.

Drug Placement Determination

Continuous development and FDA approval of new drugs for the treatment of the different disease states is perpetual in nature. Due to vast availability of medication therapies and treatments, a reasonable process of drug selection and drug usage has been developed. The goal of the PDL is to enhance the physicians' and pharmacists' abilities to provide optimal cost-effective drug therapies to patients.

The development, maintenance, and improvement of the PDL are evolutionary processes that require the constant attention of our P&T Committee. As stated above, the PDL is a continually reviewed and revised list of drug products that mirrors the prevailing clinical opinion of the P&T Committee.

New Drugs being considered for formulary inclusion will be reviewed for their safety, efficacy, FDA-approved indications, contraindications, side effects, pharmacokinetic profile, patient compliance potential, drug cost and effects on other indirect health costs. A thorough medical literature review will place an emphasis on the following characteristics:

- Safety and Effectiveness of Product
- Potential for Patient Clinical or Utilization Abuse
- Comparison Studies with Similar Products if available
- Therapeutic Outcomes and Economic Data

Drugs that are given a "priority" review by the FDA will be reviewed for possible inclusion into the formulary in as little as 7 days, if necessary. New drugs will have their characteristics compared to other similar drugs within a therapeutic class when available. New drugs that are added to an existing therapeutic class may result in the deletion of other drug(s) within the particular therapeutic class as clinical applications warrant. This process ensures the selection of the most clinically useful and cost-effective drugs within a specific therapeutic class.

Preferred Brand Products

Brand drugs (listed in bold) that are added to the PDL in the Tier 2 column. These drugs are considered to be “Preferred Brand” products. These agents are included as preferred either because they offer a clinical and/or cost advantage over other existing comparable brand drugs without sacrificing safety or effectiveness. Generically available agents are listed as tier 1 with preferred branded drugs listed as Tier 2. Drugs will not be placed in either column if there currently is insufficient clinical evidence of its appropriate clinical effectiveness.

Generic Substitution

Whenever available, when available, lower cost generic drugs approved by the FDA should be used. Generic drugs provide the patients with a more cost effective, chemically and therapeutically equivalent option that can reduce the patient's out of pocket cost. Generic drugs will be listed in the “Tier 1” column. Preferred brands are listed in the “Tier 2” column. This statement is not meant to preclude or override any state statutes that may exist (e.g., Non-Substitutable Drugs). Inclusion of a brand drug for generic substitution is subject to the following:

- An FDA Rating of "A" for generic equivalency as well as thorough review by the P&T Committee for efficacy and safety
- A narrow therapeutic index that makes it not subject to substitution due to complex pharmacokinetics, dosage forms, etc.

Single Prior Authorizations, Step Edits & Quantity Limits

Prior Authorization: Some brand drugs may require approval called “prior authorization” before the prescription can be dispensed. If a drug requires prior authorization, a designation of ^{PIA} is present. Note that your plan may also restrict specific drugs and require a Prior Authorization that may not be shown on this PDL.

When a Prior Authorization is required, one or more of the following criteria must be fulfilled before the Prior Authorization will be issued:

1. Patient must have failed an appropriate trial of generics or other clinically Preferred Brand drugs (“step edit” – see below).
2. Use of a Preferred Brand drug(s) may cause documented underlying conditions or side effects, which would be detrimental to the patient's health.
3. The treatment algorithm for that disease state is being followed according to the generally accepted published guidelines or the protocol in the FDA approved package insert.
4. A more cost effective, clinically equivalent agent is available as the Preferred Brand Drug.

Step Edits: Many drugs on the PDL may have specific step edits or quantity limits. A “step edit” is the process where another drug may be required to be used first before the prescribed drug is covered. Such drugs requiring use of another drug before it can be dispensed will have a designation of **S/E** by its name.

Quantity Limits: Our clinical team strongly recommends that some method of utilization management, including quantity limits, be placed on many drugs. Many products may have quantity limits implemented in your plan benefit design that are consistent with their FDA approved package insert or appropriate clinical guidance to control utilization. They are not specifically marked in this PDL.

Non-Listed Oral Agents/Drug Categories

Drugs categories that are not specifically listed in this document are generally categories of lower utilization where generic products are readily available (e.g., cough & cold products, muscle relaxants, etc.). Coverage of drugs in these categories and individual drugs shall be driven by plan design. These drugs may fall in any of the drug tiers listed within this document depending on the drug class.

Additionally, there are situations wherein specific drugs not listed or are available at either a higher tier copay or not covered through the pharmacy benefit. Coverage exclusion may arise as a result of many factors, including: a) location of administration, b) ready availability of a therapeutic alternative or alternatives, and c) the therapeutic class is not generally not seen in the managed care setting. Coverage of drug therapy administered by a healthcare provider (either in the office setting, hospital, or outpatient settings) may be available to benefit recipients through the medical benefit. For non-covered drugs that are unavailable through the medical benefit, members are responsible for the entire cost.

Non-Listed Injectable Products

There are several drug agents available as injectables that are not specifically addressed in this document. Questions related to coverage or tier designation for these medications should be directed to your plan document.

Drug Tiers

Periodically, our clinical team evaluates drug therapy for tier placement. The tier of specific drugs is designated within the body of this formulary, as applicable. The member's copay for medications listed in this document are classified in one of three tiers as indicated. Please note that changes may be made to this PDL based on availability or market conditions. Drugs not listed herein are considered excluded, not covered, or non-preferred.

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|---|--|--|---|
| Antibiotics: Penicillins & Cephalosporins | Multiple Generics available for Prescribing | | Cedax (Cefibuten) Spectracef (Cefditoren Pivoxil) Suprax (Cefixime) ^{SE} |
| Antibiotics: Tetracyclines | Doxycycline (various) Minocycline (various immediate release preparations) Multiple Generics available for Prescribing | | Actiate (Doxycycline Hyclate)-not all strengths covered |
| Antibiotics: Macrolides, Clindamycins, & Ketolides | Multiple Generics, does not include all salts/strengths | | Ketek (Telithromycin) |
| Antibiotics: Sulfonamides, Sulfones, & Nitrofurantoin | Multiple Generics available for Prescribing | | Furadantin Liquid (Nitrofurantoin) |
| Antibiotics: Quinolones | Ciprofloxacin Levofloxacin Moxifloxacin Ofloxacin | | Baxdela (Delafloxacin) ^{SE} Factive (Gemfloxacin) Noroxin (Norfloxacin) |
| Antibiotics: Miscellaneous Antibiotics | Vancomycin Linezolid | Difidol (Fidaxomicin) | FirVanq (Vancomycin) |
| Antivirals: General Antivirals | Acyclovir Amantadine Famciclovir Valganciclovir Valacyclovir Multiple generics available; not all dosage forms are covered | | Prevymis (Letermovir) ^{PIA} |
| Antivirals: Flu Treatment/Prevention | Oseltamivir Rimantadine | | Relenza (Zanamivir) Xofluza (Baloxavir Marboxil) |
| Antivirals: HIV Antiviral Drugs | Multiple Generics available for Prescribing | All Other Single Source Brand HIV Antiviral Drugs All Multi-Source Brand HIV Antiviral Drugs | |
| Antivirals: Pre-Exposure Prophylaxis Drugs | Tenofovir/Emtricitabine (Truvada) | Descovy (Emtricitabine/Tenofovir Alafenamide) | |
| Anti-Infectives: Anaerobic Anti-Infectives | Metronidazole Paromomycin Sulfate Tinidazole | | |
| Anti-Infectives: Antiparasitics | | | Alinia (Nitazoxanide) Egaten (Triclabendazole) |
| Anti-Infectives: Antimalarials & Antiprotozoals | Atovaquone/Proguanil Hydroxychloroquine Mefloquine Quinine Sulfate | | Arakoda (Tafenoquine) Lampit (Nifurtimox) |
| Anti-Infectives: Anthelmintic | Ivermectin ^{PA} | | Albenza (Albendazole) Biltricide (Praziquantel) Emverm (Mebendazole) |
| Antiemetics (Assorted Use) | Aprepitant Dronabinol Granisetron Meclizine Ondansetron Doxylamine/Pyridoxine Prochlorperazine Promethazine HCL Trimethobenzamide (Tigan) | | Anzemet (Dolasetron) Transderm-Scop Patch (Scopolamine) Bonjesta ER (Doxylamine Succinate/Vitamin B6) |
| Neurologic: Parkinson's Disease Drugs | Amantadine Benzotropine Bromocriptine Carbidopa/Levodopa Carbidopa/Levodopa/Entacapone Entacapone Pramipexole Rasagiline Ropinirole Tolcapone | | Banzel (Rufinamide) Nutrionz (Istradefylline) Ongentys (Opicapone) Peganone (Ethotoin) |
| Neurologic Migraine Drugs (Triptans & Other Products) | Triptans: ALL Generic TRIPTAN Tablets are covered Sumatriptan Nasal Spray Sumatriptan injectable ^{SE} Other Products: Ergotamine Ergotamine/Caffeine Dihydroergotamine | CGRP (Prevention): Ajovy Injector (Fremanezumab) ^{Clinical PIA} Emgality Injector (Galcanezumab) ^{Clinical PIA} | |
| Neurologic: Alzheimers Drugs | Donepezil Galantamine Memantine Pyridostigmine Mestinon Rivastigmine | | |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|---|--|---|--|
| Neurologic: Anticonvulsant & Antiepileptic Drugs | Anti-Convulsant Drugs Carbamazepine Clonazepam Divalproex Sodium Gabapentin Lamotrigine Oxcarbazepine Pregabalin Topiramate Valproic Acid <i>(Many other Generic Products are Available)</i> Anti-Epileptic Drugs Levetiracetam Phenytoin Phenytoin Sodium | Anti-Epileptic Drugs Dilantin 30mg ONLY (Phenytoin) | Anti-Convulsant Drugs Aptiom (Eslicarbazepine) ^{PIA} Celontin (Methsuximide) ^{SE} Diacomit (Stiripentol) ^{SE} [Drawn] Diastat Acu-Dial Gel (Diazepam) ^{PIA} Fintepla (Fenfluramine) ^{SE} Fycompa (Perampanel) ^{SE} Sabril (Vigabatrin) ^{SE} Trokendi XR (Topiramate) ^{PIA} Qudexy XR (Topiramate) ^{PIA} Anti-Epileptic Drugs Briviact (Brivaracetam) ^{SE} |
| Neurologic: Fibromyalgia, Neuropathic, and PHN Drugs | Duloxetine Gabapentin Lidocaine Patch 5% Pregabalin | | |
| Neurologic: Restless Leg Syndrome (RLS) Drugs | Pramipexole Ropinirole | | |
| Cardiovascular: Blood Modifiers (Anticoagulants/Anti-10A/Thrombin Inhibitors) | Warfarin Sodium | Eliquis (Apixaban) Xarelto 2.5mg, 10 mg, 15mg, 20mg (Rivaroxaban) & Xarelto Starter Pak – all | Savaysa (Edoxaban Tosylate) Pradaxa (Dabigatran Etexilate) |
| Cardiovascular: Blood Modifiers (Heparin-Related Drugs/DVT) | Heparin Sodium Enoxaparin Sodium | | Bevyxxa (Betrixaban) Savaysa (Edoxaban Tosylate) |
| Cardiovascular: Blood Modifiers (Platelet Aggregation Inhibitors/ACS) | Anagralide Cilostazol Clopidogrel Dipyridamole Dipyridamole & Aspirin Pentoxifylline Prasugrel | Brilinta (Ticagrelor) | |
| Cardiovascular: Blood Modifiers (Other Drugs) | Aminocaproic Acid Tranexamic Acid | | |
| Cardiovascular: Alpha Blockers, Beta Blockers & Alpha-Beta Blocker Combinations | Alpha Blockers Dibenzyline Doxazosin Prazosin Terazosin Beta Blockers Acebutolol Atenolol Betaxolol Bisoprolol Metoprolol Nadolol Pindolol Propranolol Sotalol Timolol Alpha-Beta Blocker Combinations Carvedilol Labetolol | | Alpha Blockers Dibenzyline (Phenoxybenzamine) ^{PA} Beta Blockers Bystolic (Nebivolol) Innopran XL (Propranolol) |
| Cardiovascular: Antihypertensive Combinations, Misc. | Atenolol/Chlorthalidone Bisoprolol/HCTZ Metoprolol/HCTZ Nadolol/Bendroflumethiazide | | |
| Cardiovascular: Calcium Channel Blockers | Amlodipine Diltiazem (includes extended-release products) Felodipine Isradipine Nicardipine Nifedipine Nimodipine Nisoldipine Verapamil | | |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|--|--|---|--|
| Cardiovascular: ACE Inhibitors with/without Diurectics | Benazepril, Benazepril/HCTZ Captopril, Captopril HCTZ Enalapril, Enalapril HCTZ Fosinopril, Fosinopril HCTZ Monopril, Monopril HCTZ Lisinopril, Lisinopril HCTZ Moexipril Quinapril, Quinapril HCTZ Ramipril Trandolapril | | |
| Cardiovascular: ACE Inhibitor / Calcium Channel Blocker Combinations | Benazepril/Amlodipine Trandolapril/Verapamil | | Prestalia (Amlodipine / Perindopril) ^{SE} |
| Cardiovascular: ARBs with/without Diurectics | Candesartan, Candesartan HCTZ Irbesartan, Irbesartan HCTZ Losartan, Losartan HCTZ Olmesartan, Olmesartan HCTZ Telmisartan, Telmisartan HCTZ Valsartan, Valsartan HCTZ | | Edarbi, Edarbyclor (Azilsartan/Chlorthalidone) ^{PA} |
| Cardiovascular: ARB Combinations | Olmesartan/Amlodipine/HCTZ Telmisartan/Amlodipine Valsartan/Amlodipine/HCTZ | | Byvalson (Valsartan/Nebivolol) |
| Cardiovascular: Nuprilysin Inhibitors | | | Entresto (Nuprilysin/Valsartan) |
| Diuretics & Diuretic Combinations | Bumetanide Chlorothiazide Chlorthalidone Furosemide Spironolactone/HCTZ Torsemide Triamterene Triamterene/HCTZ <i>Various other Generic agents available</i> | | |
| Cardiovascular: Renin Inhibitors & Combinations | | Tektura/HCT (Aliskiren Hemifumarate/HCT) | |
| Cardiovascular: Anti-Arrhythmic & Anti-Ischemic Agents | Amiodarone Disopyramide Dofetilide Propafenone | | Multaq (Dronedarone) Norpac CR 100mg (Disopyramide) Ranexa ER (Ranolazine) |
| Cardiovascular: Cardiac Glycosides | Digoxin | | |
| Cardiovascular: Vasodilators, Coronary, Nitrates | Isosorbide Dinitrate Isosorbide Mononitrate Nitroglycerins Nitroglycerin Patch Nitroglycerin Mist Nitroglycerin Spray | Nitroglycerins Nitrostat (Nitroglycerin Oral) | Nitroglycerins Nitro-BID Ointment (Nitroglycerin) |
| Cardiovascular: Vasodilators, Sympatholytics | Clonidine Guanfacine Hydralazine Vasodilator Combination Methyldopa/HCTZ | | |
| Cardiovascular: sGC Stimulator | | | Verquuo (Vericiguat) ^{Clinical PIA} |
| Cholesterol: Statins & Statin CCB Combinations | Atorvastatin, Atorvastatin/Amlodipine Ezetimibe/Simvastatin Fluvastatin Lovastatin Pravastatin Rosuvastatin Simvastatin | | |
| Cholesterol: Bile Acid Sequestrants | Cholestyramine Colesevelam Colestipol | | |
| Gastrointestinal: Other (Live Drugs) | Ursodiol | | |
| Cholesterol: Fibrates and Other Drugs | Fibrates Gemfibrozil Fenofibric Acid Fenofibrate, micronized Fenofibrate, nanocrystallized Other Drugs Ezetimibe Icosapent Ethyl Omega-3 Acid Ethyl Esters Sio Niacin | ACL Inhibitors Nexletol (Bempedoic Acid) ^{Clinical PIA} Nexlizet (Bempedoic Acid / Ezetimibe) ^{Clinical PIA} | |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|---|---|--|---|
| Gastrointestinal: Pancreatic Enzyme Drugs | | Creon (Lipase/Protease/Amylase) Zenpep (Lipase/Protease/Amylase) | Pancreaze (Lipase/Protease/Amylase) Pertyze, Viokase (Lipase/Protease/Amylase) |
| Urological: Benign Prostate Hyperplasia (BPH) Drugs- Alpha Blockers | Alfuzosin Doxazosin Prazosin Silodosin Tamsulosin Terazosin | | Cardura XL (Doxazosin Mesylate) |
| Urological: Benign Prostate Hyperplasia (BPH) Drugs- 5 Alpha Reductase Inhibitors | Finasteride Dutasteride Dutasteride/Tamsulosin | | |
| Urological: Benign Prostate Hyperplasia (BPH) Drugs-Phosphodiesterase-5 Enzyme Inhibitors | Tadalafil 5 mg tablet only | | |
| Urological: Overactive Bladder (OAB) Drugs | Overactive Bladder Oxybutynin Darifenacin Solifenacin Succinate Tolterodine Trosipium Other Drugs Desmopressin Acetate Flavoxate Phenazopyridine | | Other Drugs Elmiron (Pentosan Polysulfate) |
| Urological: Erectile Dysfunction (ED) Drugs | Sildenafil Tadalafil Vardenafil | | |
| Gout Drugs | Allopurinol Colchicine Febuxostat Probenecid | Mitigare (Colchicine) Colcrys (Colchicine) | |
| Urological: Ph Modifiers | Potassium Citrate + Citric Acid Potassium Citrate Potassium Acid Phosphate | | K-Phos MF, No. 2 (Sod. Phos/Pot. Phos) Renacidin (Mag Carb/Citric Acid/Lact) |
| Urological: PH / Potassium & Electrolytes | Potassium Bicarbonate Potassium Bicarb+Potassium Citrate Potassium Gluconate | | Klor-Con (Potassium Chloride) Micro-K (Potassium Chloride) |
| Urological: Phosphorus/Calcium Electrolyte Depletors | Hyperkalemia Sodium Polystyrene Sulfonate Hyperphosphatemia Calcium Acetate Lanthanum Carbonate Sevelamer Carbonate Sevelamer Hydrochloride | Hyperkalemia Lokelma (Sodium Zirconium Cyclosilicate) HK Hyperphosphatemia Phoslyra Oral Solution (Calcium Acetate) HP Velphoro (Succroferri Oxide) HP | |
| Osteoporosis Drugs / Paget's Disease (Bisphosphonates & Other Drugs) | Bisphosphonates Alendronate Ibandronate Risedronate Other Drugs Raloxifene Calcitonin | | |
| Anti-Inflammatory & Pain (NSAIDs) | Diclofenac Potassium Diclofenac Sodium Diclofenac/Misoprostol Etodolac Fenoprofen Flurbiprofen Ibuprofen Indomethacin Ketoprofen Ketorolac Meclofenamate Mefenamic Acid Meloxicam Nabumetone Naproxen Oxaprozin Piroxicam Sulindac Tolmetin | | |
| Anti-Inflammatory & Pain (COX-II Drug) | Celecoxib | | |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|--|--|--|---|
| Analgesics, Narcotics (Opioids) | Acetaminophen w/Codeine Aspirin w/Codeine Codeine/Acetaminophen/Butalbital/Caffeine Codeine/Aspirin/Butalbital/Caffeine Fentanyl Citrate Hydrocodone/Acetaminophen Hydromorphone Meperidine Morphine Sulfate Morphine Sulfate Extend Release Morphine Sulfate Sust Release Oxycodone w/Acetaminophen Tramadol (w/ Acetaminophen) | | Embeda (Morphine Sulfate/Nbtx) ^{PA} |
| Anti-Inflammatory & Pain (Salicylates & Non-Salicylates) | Salicylates Aspirin / Butalbital / Caffeine-not all formulations Diffunisal Salsalate Non-Salicylates Acetaminophen/Caffeine/Butalbital-not all formulations | | Salicylates Qutenza Patches (Capsaicin) ^{PA} with S/E |
| CNS: Anti-Anxiety Drugs (Benzodiazepines) | All Generics in this Class are Preferred | | All Brands in this Class are Non-Preferred |
| CNS: Sedatives/Sleeping Aids | Doxepin Eszopiclone ^{S/E} Flurazepam Temazepam Triazolam Quazepam Zaleplon Zolpidem immediate-release tablets (Various other Generics are available) | | |
| CNS: Other Sedative/Hypnotics (Barbiturate/CNS) | Phenobarbital | | |
| CNS: ADD/ADHD Drugs | Stimulants Amphetamine/D-Amphetamine D-Amphetamine Dexmethylphenidate Methylphenidate (IR, LA, SR) Methylphenidate (CD, ER) Non-Stimulants Atomoxetine Clonidine IR tablets Guanfacine IR tablets | Stimulants Vyvanse (Lisdexamfetamine Dimesylate) | Stimulants Daytrana Patch' (Methylphenidate) ^{S/E} Dyanavel XR Susp (Amphetamine) ^{S/E} Evekeo (Amphetamine Sulfate) ^{S/E-2} Methylin Solution (Methylphenidate) ^{S/E-2} Non-Stimulants: Kapvay (Clonidine) Intuniv (Guanfacine) |
| CNS: Excessive Sleepiness / Narcolepsy Drugs | Armodafinil Modafinil | | |
| CNS: Anti-Depressant Drugs (SSRIs) | Citalopram Escitalopram Fluoxetine capsules Fluvoxamine Paroxetine Sertraline | Trintellix (Vortioxetine) ^{S/E} | |
| CNS: Anti-Depressant Drugs (SNRIs) | Duloxetine Desvenlafaxine - not all dosage forms available Venlafaxine | | |
| CNS: Anti-Depressant Drugs (MAOIs) | Phenelzine Sulfate Tranylcypromine Sulfate | | |
| CNS: Anti-Depressant Drugs (Other Drugs) | Amitriptyline Bupropion Buspirone Clomipramine Desipramine Imipramine Mirtazapine Nortriptyline (Over 20 other 'generic only' Drugs exist) | | |
| CNS: Anti-Psychotic Drugs | Chlorpromazine Fluphenazine Haloperidol Loxapine Perphenazine Trifluoperazine Thioridazine Thiothixene | | |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|--|--|--|---|
| CNS: Atypical Anti-Psychotic Drugs | Aripiprazole Clozapine tablets Olanzapine tablets Quetiapine immediate-release tablets Risperidone tablets and solution Ziprasidone capsules | | **Approval based for FDA indication only** Fanapt (Iloperidone) ^{2 S/E} Invega ER (Paliperidone) ^{2 S/E} Latuda (Lurasidone) ^{2 S/E} Rexulti (Risperidone) ^{2 S/E} |
| CNS: Bipolar (Anti-mania) Drugs | Lithium Carbonate Valproic Acid | | Lybalvi (Olanzapine/Samidorphan) |
| Parathyroid Drugs | Calcitriol Cinacalcet Doxercaliferol Ergocalciferol Drops Paricalcitol | | Natpara (Parathyroid Hormone) ^{P/A} Rayaledge (Calcifediol) ^{P/A} |
| Gastrointestinal: Anti-Ulcer and GERD Drugs | H2 Antagonists Generic Drugs Only PPIs Esomeprazole Lansoprazole Omeprazole Pantoprazole Rabeprazole Other Drugs Metoclopramide Sucralfate | | |
| Gastrointestinal: Bowel and Colon Drugs | Inflammatory Bowel Disease/Ulcerative Colitis Balsalazide Disodium Irritable Bowel Syndrome (IBS-C, OIC, CIC) Lubiprostone Senna Glucoside Senna + Docusate Irritable Bowel Syndrome (IBS-D) Alosetron Other Drugs: Budesonide Difenoxylate/Atropine Glycopyrrolate Mesalamine | | **Mesalamine (non-preferred generic)** Irritable Bowel Syndrome (IBS-C, OIC, CIC) Linzess (Linaclotide) IBS-C, CIC Irritable Bowel Syndrome (IBS-D) Xifaxan 550' (Rifaximin) IBS-D ^{CLINICAL P/A} |
| Gastrointestinal: Laxative Drugs | Lactulose Polyethylene Glycol (PEG) 3350 | | |
| Gastrointestinal: H. Pylori Drugs | Lansoprazole/Amox/Clarithromycin | Pylera (Bismuth/Metronid/Tetracycline) Talcia (Omeprazole Mag/Amox/Rifabutin) | Omeclamox (Omeprazole/Amox/Clarithromycin) |
| Hormone Therapy: Contraceptives | <i>See plan design</i> | <i>See plan design</i> | <i>See plan design</i> |
| Hormone Therapy: Estrogen / Estrogen Combinations | Orals – Single Estradiol Estropipate ME-Test/Estrogen/Ester Patches/Gels Estradiol / Climara Patch Estradiol / Vivelle/DOT Patch Vaginal (All Forms) Estradiol / Estrace Cream Estradiol / Vagifem | Orals – Combination Products Annovera (Estradiol/Segesterone) Bijuva (Estradiol/Progesterone) Patches/Gels/Pumps Climara Pro Patch (Estradiol/Levonorgestrel) Divigel (Estradiol Gel) Minivelle Patch (Lo-Dose Estradiol) Xulane Patch (Norelgestromin/Estradiol) | Orals – Single Cenestin (Conjugated Estrogen) Menest (Esterified Estrogen) Premarin (Conjugated Estrogen) Orals – Combination Products Activella, FemHRT, Mimvey (Estradiol/Noreth) Angeliq (Estradiol/Drospirenone) Prefest (Estradiol/Norgestimate) Prempo, Premphase (Conj. Estrog/Medroxyprog) Patches/Gels/Pumps Alora Patch (Estradiol) Combipatch (Estradiol/Norethindrone) Elestrin Gel Estrogel (Estradiol) ^{S/E} Menostar Patch (Estrogen) Vaginal (All Forms) Estring, Femring Ring (Estradiol) Phexxi (Lactic Acid/Citric Acid/Potassium Bitrate) Premarin Cream (Conj. Estrogen) |
| Hormone Therapy: Endometriosis Drugs | Leuprolide | Orilissa (Elagolix) | Myfembree (Relugolix/Estradiol/Noreth) ^{S/E} |
| Hormone Therapy: Progesterone Drugs | Medroxyprogesterone Norethindone Acetate | | Depo-Provera (Medroxyprogesterone) Endometrin Supp (Progesterone, Micron.) First-Progesterone MC (Progesterone) |
| Hormone Therapy: Androgenic Drugs | Oxandrolone Prasterone Testosterone Cypionate ^{S/E} Testosterone Enanthate ^{S/E} | | |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|--|--|---|---|
| Prenatal Vitamins | See plan design | See plan design | See plan design |
| Prenatal Vitamins, Iron Deficiency Drugs | See plan design | See plan design | See plan design |
| Metabolic: Thyroid Replacements & Anti-Thyroid Drugs | Thyronine (Free T3) Liothyronine Thyroxine (Free T4) Levothyroxine Other Drugs Propylthiouracil Methimazole | | Mixed Thyronine/ Thyroxine Amour Thyroid (Thyroid, pork) Thyrolar (Liotrix, pork) Westhroid, WP-Thyroid (Thyroid, pork) Other Drugs NP-Thyroid (Thyroid, pork) |
| Metabolic: Glucocorticoid/Mineralocorticoid Drugs (Systemic) | Budesonide Dexamethasone Hydrocortisone Prednisone Prednisolone Multiple Generics are available | | Celestone (Betamethasone) Dexpak (Dexamethasone) Emflaza (Deifazacort) |
| Diabetes: Insulin Products | Short-Acting Insulin Insulin Aspart 100 Unit/mL Vial Insulin Aspart Flexpen Insulin Aspart Penfill Insulin Lispro Flexpen Insulin Lispro Vial Insulin Lispro Jr Mixed Insulin Insulin Aspart Protamine and Insulin Aspart 70/30* Insulin Lispro Mix 75-25 Kwikpen | Short-Acting Insulin Lyumjev (Insulin Lispro/Trepostinil) Long-Acting Insulin Lantus (Insulin Glargine) (Insulin Detemir) Toujeo/Toujeo Max Solostar (Insulin Glargine) Tresiba (Insulin Degludec) Human Insulin Humulin (Insulin, Assorted) Novolin (Insulin Aspart) | Short-Acting Insulin Admelog (Insulin Lispro) ^{S/E} Apidra (Insulin Glulisine) Long-Acting Insulin Basaglar (Insulin Glargine) ^{PIA} Semglee (Insulin Glargine) ^{PIA} |
| Diabetes: GLP-1, GLP-1 / Insulin Combinations, and Other | | GLP-1 ^{S/E} Through Metformin Ozempic (Semaglutide) Rybelsus Tablets (Semaglutide) Trulicity (Dulaglutide) Victoza (Liraglutide) GLP-1 / Insulin Combinations ^{S/E} Through Metformin Soliqua (Insulin Glargine & Lixisenatide) Xultophy (Insulin Degludec & Liraglutide) | GLP-1 ^{S/E} Through Metformin Adlyxin (Lixisenatide) Bydureon/Bydureon BCise (Exenatide) Byetta (Exenatide) Other SymlinPen (Pramlintide Acetate) |
| Diabetes: Other Drugs (Hypoglycemia) | Glucagon | GlucaGen Kit (Glucagon) | Proglycem Oral Suspension (Diazoxide) |
| Diabetes: Oral Antidiabetics Drugs | Glyburide Metformin immediate release tablets Metformin extended release tablets Over 30 other generic agents available | | |
| Diabetes: Thiazolidinediones (TZDs) & Combinations | Pioglitazone Pioglitazone-Glimipiride Pioglitazone-Metformin | | |
| Diabetes: DPP-4/DPP-4 Combinations | Alogliptin Alogliptin/Metformin Alogliptin/Pioglitazone | These DPP-4 / DPP-4 Combos ^{S/E} through metformin Janumet/XR (Sitagliptin/Metformin) Januvia (Sitagliptin) Jentadueto (Linagliptin/Metformin) XR (Saxagliptin/Metformin) (Saxagliptin) Tradjenta (Linagliptin) | Kombiglyze Onglyza |
| Diabetes: SGLT-2 Inhibitors and SGLT-2/DPP-4 Combinations | | SGLT-2 Inhibitors ^{S/E} Through Metformin Farxiga (Dapagliflozin) Invokana (Canagliflozin) Invokamet/XR (Canagliflozin/Metformin) Jardiance (Empagliflozin) Synjardy (Empagliflozin/Metformin) Xigduo (Dapagliflozin/Metformin) SGLT-2 / DPP-4 Combinations ^{S/E} Through Metformin Glyxambi (Empagliflozin/Linagliptin) Qtern (Dapagliflozin/Saxagliptin) Qternmet XR (Dapagliflozin/Saxagliptin/Metformin) Trijardy XR (Empagliflozin/Linagliptin/Metformin) | |
| Diabetes: Diabetic Supplies (Meters and Strips) | | Meters & Strips Johnson & Johnson Products | Meters Other Brands of Meters are either NOT Covered OR may be grandfathered for a short time. Strips Other Brands of Strips are either NOT Covered or may be grandfathered for a short time |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|---|--|--|---|
| Diabetes: Diabetic Supplies (Lancet Devices & Lancets) | Lancets Devices & Lancets Store Brand Syringes & Supplies Store Brand | Syringes & Supplies Johnson & Johnson Products | Lancets Devices & Lancets All Other Lancets, Meters, and Strips Syringes All Other Syringes, including, but not limited to: B-D, Clickfine, Monoject, Terumo UltiCare, Unifine, all other brand products |
| Diabetes: Continuous Blood Glucose Monitoring (CGMD) | | Freestyle Libre/Libre-2 Reader & Sensors | Dexcom Transmitter, Receiver & Sensors ^{PA} |
| Anorexiants: Weight Loss Drugs | <i>See plan design</i> | <i>See plan design</i> | <i>See plan design</i> |
| Respiratory: Allergy Drugs | Non/Low Sedating Antihistamines <i>Multiple Generics are available</i> Intranasal Corticosteroids Flunisolide Fluticasone Mometasone Triamcinolone Acetate Other Allergy Drugs (Sprays) Azelastine | | Intranasal Corticosteroids Beconase AQ Spray (Beclomethasone Dipropionate) |
| Respiratory: Asthma Drugs | Short Acting Beta Agonists (SABA) Albuterol Sulfate Inhaler Levalbuterol Terbutaline Inhaled Corticosteroids (ICS) Budesonide ICS / LABA Combination Drugs Fluticasone/Salmetero (Wixela Inhub) Budesonide/Formoterol | Short Acting Beta Agonists (SABA) ProAir HFA/RespiClick (Albuterol Sulfate) Ventolin/HFA (Albuterol Sulfate) Inhaled Corticosteroids (ICS) Arnuity (Fluticasone Furoate) Flovent (Fluticasone) Pulmicort Flexhaler (Budesonide) Qvar/Qvar ReditHaler (Beclomethasone) | Short Acting Beta Agonists (SABA) Proventil/HFA (Albuterol Sulfate) ProAir Digihaler only (Albuterol Sulfate w/Device) Inhaled Corticosteroids (ICS) Aerospan (Flunisolide) Alvesco (Ciclesonide) ICS/LABA Combination Drugs AirDuo – All (Fluticasone/Salmeterol) Breo (Fluticasone/Vilanterol) Long Acting Muscarinic Agonists (LAMA) Spiriva 1.25mcg (Tiotropium) |
| Respiratory: Leukotriene Inhibitors | Montelukast Zafirlukast Zileuton | | |
| Respiratory: COPD Drugs | Beta Agonists / Muscarinic Agonists, Short Acting Albuterol/Ipratropium ICS/LABA Combination Drugs Fluticasone/Salmeterol / Wixela Inhub | Beta Agonists / Muscarinic Agonists Combivent (Albuterol/Ipratropium) [SABA/SAMA] Long Acting Beta Agonists (LABA) Arcapta (Indacaterol Powder) Serevent (Salmeterol) Striverdi (Olodaterol) Long Acting Muscarinic Agonists (LAMA) Incruse (Umeclidinium) Spiriva 2.5mcg, Spiriva Handihaler (Tiotropium) LABA / LAMA Combination Drugs Anoro (Umeclidinium/Vilanterol) Stiolto (Tiotropium/Olodaterol) ICS / LABA Combination Drugs Advair (Fluticasone/Salmeterol) (Fluticasone/Vilanterol) (Budesonide/Formoterol) ICS / LABA / LAMA Combination Drugs Breztri (Budesonide/Glycopyrrolate/Formoterol) Trelegy (Umeclidinium/Vilanterol/Fluticasone) Inhalation/Nebulizer Drugs Perforomist Inhalation (Formoterol Fumarate) Yupelri Inhalation (Revefenacin) Other Drugs Daliresp (Roflumilast) | Beta Agonist / Muscarinic Agonists Atrovent HFA (Ipratropium) (SAMA) Long Acting Beta Agonists (LABA) Foradil (Formoterol) Long Acting Muscarinic Agonists (LAMA) Seebri (Glycopyrronium Bromide) Tudorza (Aclidinium Bromide) LABA / LAMA Combination Drugs Utibron (Indacaterol/Glycopyrronium) Bevespi (Formoterol/Glycopyrronium) Inhalation/Nebulizer Drugs Brovana (Arformoterol Tartrate) ^{SE} Lonhala Magnair (Glycopyrrolate) ^{SE} |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|---|--|---|---|
| Dermatology: Acne, Rosacea, and Psoriasis Drugs | Acne – Topicals (Acne/Seborrhea/Dermatitis) Clindamycin Erythromycin+Ethanol Fluticasone Propionate Sulfacetamide Tretinoin <i>Generics only; not all dosage formulations are available</i> Acne – Oral Antibiotics Doxycycline Minocycline tablets <i>Generics only; not all dosage formulations are available</i> Acne – Topical Antibiotics Adapalene cream, gel (generic only) Benzoyl Peroxide Rosacea Metronidazole (gel and cream formulations) Eczema (Topical Immunotherapy) Tacrolimus Psoriasis – Orals Acitretin Psoriasis – Topical Agents Calcipotriene ^{SE} Calcipotriene/Betamethesone (cream only) Tazarotene (cream only) | Acne – Oral Antibiotics Absorica (Isotretinoin) Psoriasis – Topicals Taclonex Suspension (Calcipotriene/Betameth) ^{PA} Tazorac Gel only (Tazarotene) ^{PA} | Eczema (Immuno Topicals) Elidel (Pimecrolimus) ^{PA, SE} Psoriasis – Orals 8-MOP (Methoxsalen) |
| Dermatology: Keratolytics Drugs | Keratolytic (AK) Drugs Moisture Drugs Diclofenac Sodium ^{SE} Fluorouracil ^{SE} Immunomodulators Imiquimod ^{SE} | | |
| Dermatology: Anti-Fungal Drugs | Antifungals Orals Clioquinazole Fluconazole Itraconazole Miconazole Voriconazole Topicals Ciclopirox Econazole Nitrate Halobetasol Propionate Hydrocortisone Ketoconazole Naftifine Nystatin Terbinafine | Orals Lamisil Granules only (Terbinafine) | Orals Ancobon (Flucytosine) |
| Dermatology: Scabies & Pediculosis (Lice) Drugs | Malathion 5% Permethrin 5% | | |
| Dermatology: Topical Anesthetics & Analgesics Drugs | Diclofenac Sodium Lidocaine Patches | | Analpram-HC (HC Acetate/Pramoxine) Epifoam (HC Acetate/Pramoxine HCL) Novacort (HC Acetate/Pramoxine) Pramosone (HC Acetate/Pramoxine) Proctofoam-HC (HC Acetate/Pramoxine) |
| Dermatology: Other Topical Products | Acyclovir (OINTMENT only) Mupirocin | | Altanax (Retapamulin) |
| Vaginal Antibiotics | Metronidazole gel Vandazole Gel Clindamycin | | AVC Cream (Sulfanilamide) Cleocin Supp (Clindamycin Phosphate) Clindesse (Clindamycin Phosphate) Nuessa Gel (Metronidazole) |
| Vaginal Antifungal Drugs | Fluconazole Itraconazole Miconazole Nystatin Vaginal tabs Terconazole Voriconazole | | Femstat (Butoconazole) Gynazole (Butoconazole) |

| DRUG CLASS/THERAPEUTIC CATEGORY | GENERIC DRUGS | PREFERRED BRANDS | NON-PREFERRED BRANDS |
|---|--|---|---|
| Ophthalmic: Anti-Infectives | Ciprofloxacin Gentamycin Ofloxacin Moxifloxacin Polymyxin/Trimethoprim Prednisolone/Sulfacetamide Sulfacetamide 10% Tobramycin Trifluridine | Azasite (Azithromycin) | Blephamide/SOP (Na Sulfacet/Prednisolone) Natacyn (Natamycin) Zirgan Gel (Ganciclovir) Zymarid (Gatifloxacin) |
| Ophthalmic: Antihistamines | Epinastine Ketotifen Olopatadine | | Emadine (Emedastine) |
| Ophthalmic: Immunomodulators (Dry Eye) | | Restasis (Cyclosporine) | Xiidra (Lifitegrast) |
| Ophthalmic: Mast Cell Stabilizers | | | Alocril (Nedocromil Sodium) Alomide (Lodoxamide) |
| Ophthalmic: Anti-Inflammatory Drugs | Diclofenac Sodium Fluorometholone Ketorolac Loteprednol Prednisolone Acetate | Alrex (Loteprednol) Ilevro (Nepafenac) | Bromsite (Bromfenac Sodium) Durezol (Difluprednate) Maxidex (Dexamethasone) |
| Ophthalmic: Glaucoma Drugs (Miotics and Prostaglandins) | Miotics Betaxolol Brimonidine Brimonidine/Brinzolamide Dorzolamine Levobunolol Metipranolol Pilocarpine Timolol Timolol/Dorzolam Prostaglandins Latanoprost | Miotics Combigan (Brimidone/Timolol) Prostaglandins Lumigan (Bimatoprost) Zioptan (Tafluprost) | Miotics Azopt (Brimonidine) Betoptic-S (Betaxolol) Iopidine (Apraclonidine) Miochol-E (Acetylcholine Chloride) Rhopressa (Netarsudil) Prostaglandins Rescula (Unoprostone Isopropyl) Rocklatan (Netarsudil/Latanoprost) Travatan Z (Travoprost) Vyzulta (Latanoprostene Bunod) Xelphos (Latanoprost-PF Emulsion) |
| Ophthalmic: Mydriasis Drugs (Pupils) | Atropine Cyclopentolate Tropicamide | | Cyclomydril (Phenylephrine/Cyclopent) Paremyd (Hydroxyamphetamine/Tropicamide) |
| Ophthalmic: Antibiotic-Corticoid Drugs | Neomycin/Polymyxin/Dexamethasone Tobramycin/Dexamethasone | Zylet (Tobramycin/Loteprednisolone) | Pred-G (Gentamicin/Prednisolone) |
| Ear Drugs | Ciprofloxacin Ciprofloxacin/Dexamethasone Fluocinolone Acetonide Neomycin/Polymixin-B/Hydrocortisone | | Cipro HC (Ciprofloxacin/HC) Coly-Mycin S (Neomycin/Colist Sulf) Cortane-B (HC/Pramoxine/Chlorox) Otovel (Ciprofloxacin/Fluocinolone) |
| Miscellaneous: Dependence & Withdrawal Symptom Drugs | Alcohol Dependence Drugs Disulfiram Opioid Dependence Drugs Buprenorphine/Naloxone SL tablets ^{PA} Smoking Cessation See plan design | | Alcohol Dependence Drugs Vivitrol injectable (Naltrexone) ^{PA} Opioid Dependence Drugs Withdrawal Symptom Drugs Lucemyra (Lofexidine) |
| Miscellaneous: Parasympathetic Saliva Drugs | Bethanechol Pilocarpine | | |
| Miscellaneous: Rescue Drugs | Anaphylaxis Drugs Epinephrine Pen (generic only) Epinephrine Pen Jr. (generic only) | Anaphylaxis Drugs Epipen, Epipen Jr (Epinephrine) Opioid Overdose Agents Narcan Nasal Spray (Naloxone) | |